

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		Attorney Docket Number	7003/52
		First Named Inventor	Michael Fluempel
<b>COMPLETE IF KNOWN</b>			
		Application Number	PCT/EP2004/011466
		Filing Date	10/06/2004
		Art Unit	Unassigned
		Examiner Name	Unassigned

☒ Declaration Submitted With Initial Filing
 OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**USE OF 8-PRENYLNARINGENIN FOR HORMONE REPLACEMENT THERAPY**

*(Title of invention)*

The specification of which

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 10/06/2004 as United States Application Number or PCT International

Application Number PCT/EP2004/011466 was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for Continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed Priority Claimed	Certified Copy Attached?	
EP 03090335.5	Europe	10/07/2003		YES	NO
				<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

# DECLARATION - Utility or Design Patent Application

Direct all  
Correspondence to:

☒ The address  
associated with  
Customer Number:

27774

OR ☐ Correspondence  
address below

Name

Address

City

State

Zip

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

MICHAEL

HUEMPEL

Inventor's Signature

*ch. Huempel*

Date

April 25, 2006

Residence: City  
BERLIN

State

Country  
GERMANY

Citizenship  
GERMANY

Mailing Address  
SINGENER WEG 24

City  
BERLIN

State

Zip  
D-14163

Country  
GERMANY

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

WOLF-DIETER

SCHLEUNING

Inventor's Signature

Date

Residence: City  
BERLIN

State

Country  
GERMANY

Citizenship  
GERMANY

Mailing Address

AM WALDPARK 28

City  
BERLIN

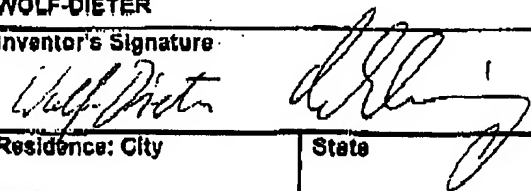
State

Zip  
D-13467

Country  
GERMANY

☒ Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

# DECLARATION - Utility or Design Patent Application

Direct all Correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	27774	OR	<input type="checkbox"/> Correspondence address below
Name					
Address					
City		State		Zip	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
MICHAEL			HUEMPEL		
Inventor's Signature					Date
Residence: City		State		Country	
BERLIN				GERMANY	
Citizenship					
GERMANY					
Mailing Address					
SINGENER WEG 24					
City		State		Zip	
BERLIN				D-14163	
Country		GERMANY			
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
WOLF-DIETER			SCHLEUNING		
Inventor's Signature					Date
					26.04.06
Residence: City		State		Country	
BERLIN				GERMANY	
Citizenship		GERMANY			
Mailing Address					
AM WALDPARK 28					
City		State		Zip	
BERLIN				D-13467	
Country		GERMANY			
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

**DECLARATION – ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**

Page 3 of 3

Name of additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
OLAF		SCHAEFER	
Inventor's Signature <i>O. Schaefer</i>		Date 27/04/2006	
Residence: City	State	Country	Citizenship
BERLIN		GERMANY	GERMANY
Mailing Address			
NACHODSTR. 1			
City	State	Zip	Country
BERLIN		D-10779	GERMANY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
PÄIVI		ISAKSSON	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
KIMITO		FINLAND	FINLAND
Mailing Address			
MARIEBERGSVÄGEN 8			
City	State	Zip	Country
KIMITO		FI-25700	FINLAND
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
ROLF		BOHLMANN	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
BERLIN		GERMANY	GERMANY
Mailing Address			
KÜHLER WEG 6 A			
City	State	Zip	Country
BERLIN		D-14055	GERMANY

**DECLARATION – ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**

Page 3 of 3

Name of additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
OLAF		SCHAEFER	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
BERLIN		GERMANY	GERMANY
Mailing Address			
NACHODSTR. 1			
City	State	Zip	Country
BERLIN		D-10779	GERMANY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
PÄIVI		ISAKSSON	
Inventor's Signature <i>Päivi Isaksson</i>			Date <i>20 Nov 2006</i>
Residence: City	State	Country	Citizenship
KIMITO		FINLAND	FINLAND
Mailing Address			
MARIEBERG SVÄGEN 8			
City	State	Zip	Country
KIMITO		FI-25700	FINLAND
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
ROLF		BOHLMANN	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
BERLIN		GERMANY	GERMANY
Mailing Address			
KÜHLER WEG 6 A			
City	State	Zip	Country
BERLIN		D-14085	GERMANY

**DECLARATION - ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**

Page 3 of 3

Name of additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
OLAF		SCHAEFER	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
BERLIN		GERMANY	GERMANY
Mailing Address			
NACHODSTR. 1			
City	State	Zip	Country
BERLIN		D-10779	GERMANY
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
PÄIVI		ISAKSSON	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
KIMITO		FINLAND	FINLAND
Mailing Address			
MARIEBERGSVÄGEN 8			
City	State	Zip	Country
KIMITO		FI-25700	FINLAND
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
ROLF <i>Rolf</i>		BOHLMANN <i>Bohlmann</i>	
Inventor's Signature			Date
<i>Rolf Bohlmann</i>			<i>8. Mai '02</i>
Residence: City	State	Country	Citizenship
BERLIN		GERMANY	GERMANY
Mailing Address			
KÜHLER WEG 6 A			
City	State	Zip	Country
BERLIN		D-14055	GERMANY

**POWER OF ATTORNEY  
And  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Attorney Docket Number	7003/52
First Named Inventor	Michael Huempel
Application Number	PCT/EP2004/011466
Filing Date	10/06/2004
Art Unit	Unassigned
Examiner Name	Unassigned

**I hereby appoint:**

☒ Practitioners associated with the Customer  
Number:

**27774**

☐ Practitioner(s) named below:

Name	Registration Number

As my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected herewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:  
OR

☐ The address associated with Customer Number:

OR

☐ Firm or  
Individual Name

Address

City

Country

Telephone

Fax

State

Zip

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.7.1  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature

Date

Name

Telephone

Title and Company

KAIROSmed GMBH

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☒ \* Total of 1 forms submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant: Michael Huempel

Int'l Application No.: PCT/EP2004/011465

Int'l Filing Date: 10/06/2004

Entitled: USE OF 8-PRENYLNARINGENIN FOR HORMONE REPLACEMENT THERAPY

KAIROSmed GMBH

(Name of Assignee)

a German Corporation

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

States that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by percentage) of its ownership interest is \_\_\_\_\_ %

In the patent application/patent identified above by virtue of either:

A ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_ or for which a copy thereof is attached.

OR

B ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

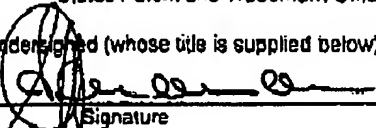
1. From \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded at the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded at the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded at the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

(NOTE: A separate copy (i.e., a true copy of the original assignment documents(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the United States Patent and Trademark Office. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

  
Signature

April 25, 2006  
Date

ARNO HEUERMANN

Printed or Typed Name

COO

Title

+49 (30) 206 396-14  
Telephone Number

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the United States Patent and Trademark Office to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the United States Patent and Trademark Office. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, United States Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: COMMISSIONER FOR PATENT, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

ASSIGNMENT

We,

1. Michael Huempel, a citizen of Germany;
2. Wolf-Dieter Schleuning, a citizen of Germany;
3. Olaf Schaefer, a citizen of Germany;
4. Päivi Isakson, a citizen of Finland;
5. Rolf Bohlmann, a citizen of Germany.

who reside at

1. Singener Weg 24, D-14163 Berlin, Germany;
2. Am Waldpark 28, D-13467 Berlin, Germany;
3. Nuchodstr. 1, D-10779 Berlin, Germany;
4. Mariebergsvägen 8, FI-25700 Kimito, Finland;
5. Kühler Weg 6 A, D-14055, Germany.

have made certain inventions or discoveries (or both) set forth in an application for Letters Patent of the United States of America entitled:

USE OF 8-PRENYLNARINGENIN FOR HORMONE REPLACEMENT THERAPY

which application was

- ☐ executed by the inventor(s) on the date of execution of this assignment, or
- ☒ described in an application for Letters Patent of the United States, filed on October 6, 2004, and accorded Serial No. PCT/EP2004/011466.

and

KAIROSmEd GMBH, a German corporation having a place of business at 12 Hausvogteiplatz, D-10117 Berlin, Germany,

and which together with its successors and assigns are hereinafter called "Assignee", is desirous of acquiring the title, rights, benefits and privileges hereinafter recited, and of confirming the same or any part thereof heretofore acquired by Assignee.

Now, therefore, for valuable consideration furnished by Assignee to us, receipt and sufficiency of which we hereby acknowledge, we hereby, without reservation:

1. Assign and convey to and confirm in Assignee the entire right, title and interest in and to said inventions and discoveries, said application for Letters Patent of the United States of America, any and all other applications for Letters Patent on said inventions and discoveries in whatsoever countries, including all divisional, renewal, substitute, continuation and Convention applications based in whole or in part upon said inventions or discoveries or upon said applications, and any and all Letters Patent and reissues and extensions of Letters Patent granted for said inventions and discoveries or upon said applications, and every priority right that is or may be predicated upon or arise from said inventions, said discoveries, said applications and said Letters Patent;

2. Authorize Assignee to file patent applications in any or all countries on any or all of said inventions and discoveries in our names or in the name of Assignee or otherwise as Assignee may deem advisable, under the International Convention or otherwise;

3. Authorize and request the Commissioner of Patents of the United States of America and the empowered officials of all other governments to issue or transfer all said Letters Patent to Assignee, as assignee of the entire right, title and interest therein or otherwise as Assignee may direct;

4. Warrant that we have not knowingly conveyed to others any right in said inventions, discoveries, applications or patents or any license to use the same or to make, use or sell anything embodying or utilizing any of said inventions or discoveries; and that we have good right to assign the same to Assignee without encumbrance;

5. Bind our heirs and legal representatives, as well as ourselves, to do, upon Assignee's request and at its expense, but without additional consideration to us or them, all acts reasonably serving to assure that the said inventions and discoveries, the said patent applications and the said Letters Patent shall be held and enjoyed by Assignee as fully and entirely as the same could have been held and enjoyed by us or our heirs or representatives if this assignment had not been made; and particularly to execute and deliver to Assignee all lawful application documents including petitions, specifications, and oaths, and all assignments, disclaimers, and lawful affidavits in form and substance as may be requested by Assignee; to communicate to Assignee all facts known to us relating to said inventions and discoveries or the history thereof; and to furnish Assignee with any and all documents, photographs, models, samples and other physical exhibits in our control or in the control of our heirs or legal representatives and which may be useful for establishing the facts of our conception, disclosures, and reduction to practice of said inventions and discoveries.

The effective date of this instrument is the date accompanying our signatures, herein below.

In testimony whereof we have affixed our signatures.

_____	_____	<i>Michael Huempel</i>	<i>April 25, 2006</i>
(Witness)	(Date)	Michael HUEMPEL	(Date)

_____	_____
(Witness)	(Date)

_____	_____	Wolf-Dieter SCHLEUNING	(Date)
(Witness)	(Date)		

_____	_____
(Witness)	(Date)

_____	_____	Olaf SCHAEFER	(Date)
(Witness)	(Date)		

_____	_____
(Witness)	(Date)

_____	_____	Päivi ISAKSSON	(Date)
(Witness)	(Date)		

_____	_____
(Witness)	(Date)

_____	_____	Rolf BOHLMANN	(Date)
(Witness)	(Date)		

_____	_____
(Witness)	(Date)

ASSIGNMENT

The effective date of this instrument is the date accompanying our signatures, herein below.

In testimony whereof we have affixed our signatures.

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Michael HUEMPEL (Date)

\_\_\_\_\_  
(Witness) (Date)

*H. Hoff* *9/5/06*  
\_\_\_\_\_  
(Witness) (Date)

*Wolf-Dieter Schleuning* *26.04.06*  
\_\_\_\_\_  
Wolf-Dieter SCHLEUNING (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Olaf SCHAEFER (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Päivi ISAKSSON (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Rolf BOHLMANN (Date)

\_\_\_\_\_  
(Witness) (Date)

ASSIGNMENT

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\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Michael HUEMPEL (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Wolf-Dieter SCHLEUNING (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

*O. Schaefer* 27.4.2006  
\_\_\_\_\_  
Olaf SCHAEFER (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Päivi ISAKSSON (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Rolf BOHLMANN (Date)

\_\_\_\_\_  
(Witness) (Date)

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\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Michael HUEMPEL (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Wolf-Dieter SCHLEUNING (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Olaf SCHAEFER (Date)

\_\_\_\_\_  
(Witness) (Date)

Olaf Hines 20.11.06  
(Witness) (Date)

Päivi Isaksson 20 Nov 2006  
Päivi ISAKSSON (Date)

Evelyn Hunt 20.11.06  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Rolf BOHLMANN (Date)

\_\_\_\_\_  
(Witness) (Date)

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\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Michael HUEMPEL (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Wolf-Dieter SCHLEUNING (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Olaf SCHAEFER (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
Päivi ISAKSSON (Date)

\_\_\_\_\_  
(Witness) (Date)

\_\_\_\_\_  
(Witness) (Date)

*Rolf Bohlmann* 8. Mai '06  
\_\_\_\_\_  
Rolf BOHLMANN (Date)

\_\_\_\_\_  
(Witness) (Date)

ASSIGNMENT